

Response to Terrorism

Is San Diego County Ready?



Aug 1998



March 1999

ALL HAZARD APPROACH

- Be ready for all emergencies
- Train together
- Cross Train together
- Educate the public
- Equip all Responders with proper PPE



Threat Management Guidelines

BIOLOGICAL THREAT MANAGEMENT GUIDELINES

IF YOU RECEIVE A THREATENING LETTER OR NOTE

RELAX AND REMAIN CALM - Although any threatened use of a biological agent must be treated as though it is real, experience has demonstrated that these are likely to be a HOAX. If the suspected biological agent is reported as Anthrax, be assured that it is not contagious and that effective treatment is readily available if administered before the onset of symptoms.

WHAT SHOULD YOU DO?

1. If it is a letter that you have opened, set it down gently at the location where you first read it. Then retreat to an area that will minimize your exposure to others. Avoid contact with others when possible, and remain in this area. Public Safety officials will come to you.
2. If it is a note that you happen to find, LEAVE IT ALONE.
3. Advise a coworker in the immediate area what has happened and request that they call 911.
4. Request that notification is made to have the building's ventilation system shut down, and turn off any fans in the immediate area.
5. Do not allow others into the area. If others enter, they must stay until instructed to leave by Public Safety officials.
6. Remain calm. Exposure does not mean you will become sick. Health officials will provide specific information and instructions about possible symptoms and effective treatments to prevent illness.

WHAT SHOULDN'T YOU DO?

1. Do not pass the letter or note to others.
2. Do not disturb the contents or handle it any further. This may only spread contamination and increase the chance of it getting into the air.
3. Do not ignore the threat. It must be treated as though it is real until properly evaluated.

IF YOU RECEIVE A PHONE THREAT

WHAT SHOULD YOU DO?

1. Listen carefully to the caller so you can recall the details when asked by Public Safety Officials at a later time.
2. Notify a coworker immediately to call 911. Do not use the same phone that the threat was received on; it may be possible to trace the call during a later investigation.
3. Ensure that notification is made to have the building's ventilation system shut down.
4. Remain calm; similar threats have all proven false and this is likely to be a hoax also.

WHAT SHOULDN'T YOU DO?

1. Do not ignore the threat. It must be treated as though it is real until properly evaluated.
2. Do not argue with or antagonize the caller; you could make the situation worse.

WHAT YOU CAN EXPECT FROM A RESPONSE BY PUBLIC SAFETY OFFICIALS

Fire, Law Enforcement, and Emergency Medical Services will manage the scene. People will be requested to cooperate by waiting in the area until an appropriate evaluation can be made, and information will immediately be provided to them as it becomes available.

1. There is likely to be a decontamination process (cleaning/washing) conducted. The specific process will be structured to meet the conditions present.
2. Personal contact information will be solicited by authorities, to contact people after the incident and provide any follow-up information. This information will be kept confidential by Public Safety authorities.

GENERAL GUIDELINES PRIOR TO ANY THREAT

1. Check the location and security of all fresh air intakes to the building's ventilation system.
2. Maintain a current map of the building or venue, to be given to response personnel if needed.
2. Assess the general security of the building:
 - a) Operability and condition of any video surveillance system and its coverage of entry/exit points;
 - b) Accessibility by any person to unauthorized areas, such as mechanical or utility rooms;
 - c) Operability of any public address system, and the drafting of a sample alert statement that might be utilized during such an event.
3. Inform all permanent tenants and/or employees of these guidelines.

This information is provided by the San Diego County Hazardous Materials Incident Response Team (HIRT), with input from the San Diego Office of the Federal Bureau of Investigation. It is intended for public information and planning purposes for management / security personnel of public assembly occupancies.

TRAINING

- Five year training plan
 - ◆ Design exercises
 - ◆ Explosive (2nd year)
 - ◆ Chemical
 - ◆ Biological
 - ◆ Radiological
- 19 Tabletop Exercises
- Field Exercises patterned after tabletop
 - ◆ Del Mar Fairgrounds Explosion (Nov 15)

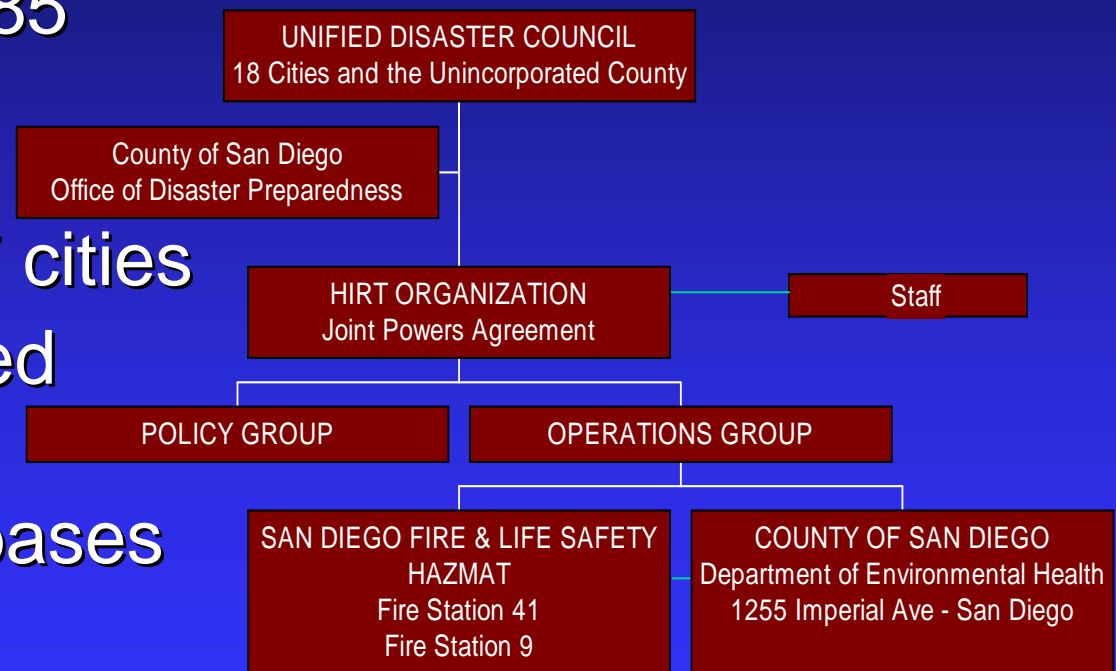


ACTIONS TRAINED TO DO

- Establish Unified Command
 - ◆ Representative from the venue included
- First Responders establish control zones and deny entry or exit from the area.
 - ◆ Physical force shall not be used to stop the public from leaving the area
 - ◆ Anyone requiring medical treatment will be decontaminated prior to transport.
- Consider secondary devices

Hazardous Materials Incident Response Team “HIRT”

- Formed in 1985
 - ◆ Joint Powers agreement
- Funded by 17 cities
- Unincorporated County
- Two military bases
- Five Indian Reservations



San Diego County Department of Environmental Health



■ *10 Personnel*

- ◆ All trained as HazMat Specialist
- ◆ All California Registered Environmental Health Specialists
- ◆ 2 trained as Industrial Hygienist



San Diego Fire-Rescue Department

- **44 personnel**
 - ◆ All trained as HazMat Specialist
 - ◆ 12 trained as Paramedics
 - ◆ 6 trained as SWAT Medics



Explosives Disposal Teams

- ***San Diego Fire-Rescue Department***
 - ◆ 2 FF Arson Investigation Team, on-duty 7/24
 - ◆ 2 FF Explosive Device Team, on-duty 7/24
- ***County of San Diego - Sheriff's Dept.***
 - ◆ 7 Bomb/Arson Techs, on-duty 7/24
- ***San Diego Police Dept.***
 - ◆ 4 Officer Arson Investigation, on-duty 4/10
- ***ATF & FBI***
 - ◆ 1 Agent from each Bureau

San Diego Police Department

SWAT

- ***Special Response Team (SRT)***
 - ◆ 18 officer cadre, on-duty 4/10 x day shift
 - ◆ Dedicated staffing - full time SWAT

- ***Primary Response Team (PRT)***
 - ◆ 78 officer cadre, on-duty 4/10 x 3 shift
 - ◆ Dual role patrol officers, first responder SWAT element

San Diego County - Sheriff's SED

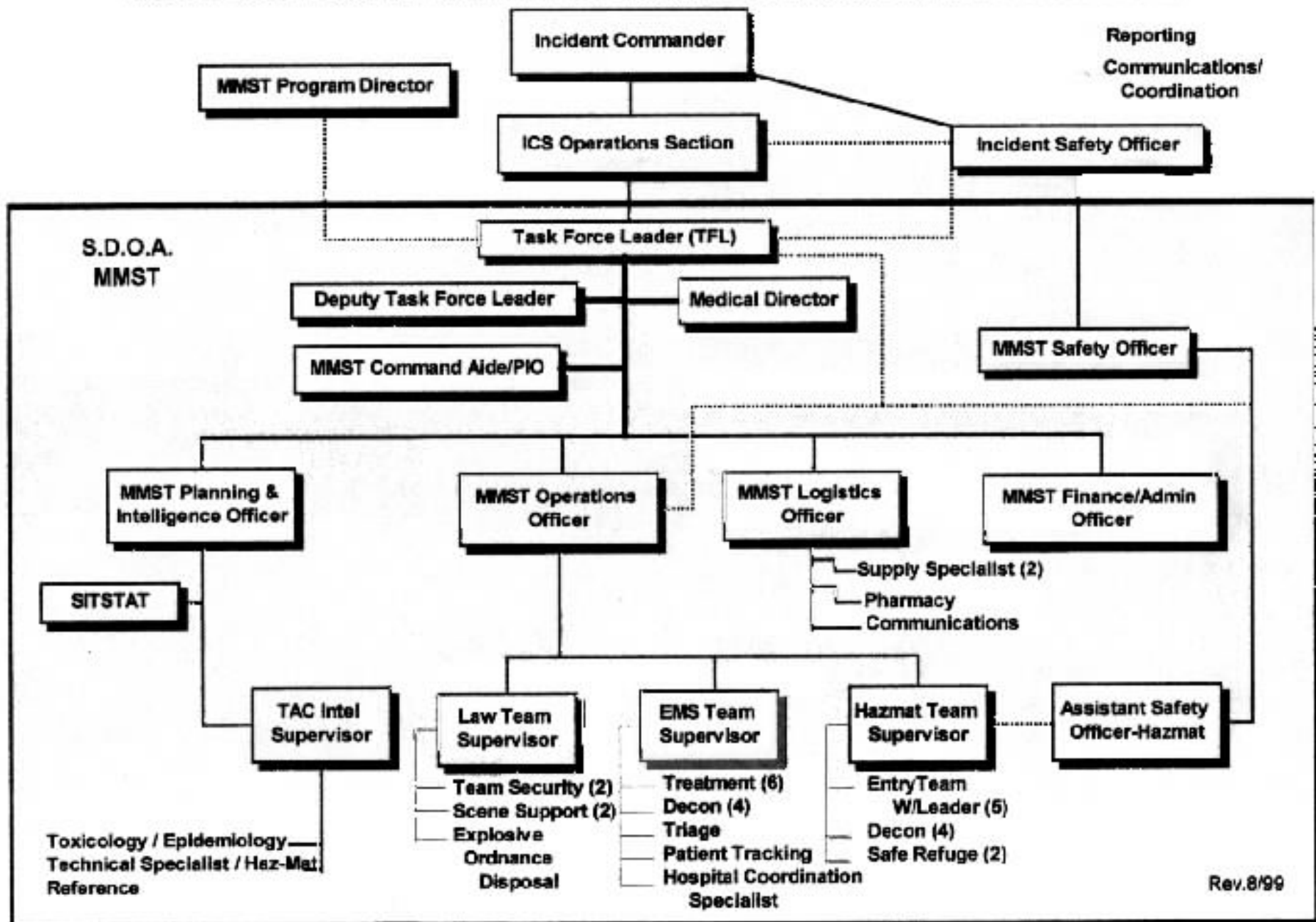
■ ***Special Enforcement Detail (SWAT) Team***

- ◆ 18 officers, on-duty 4/10
- ◆ 24/7 callback
- ◆ Dedicated staffing - Primary duty SWAT
- ◆ Used for special details and assignments

Secondary Response Team

- ◆ 9 officers, assigned to other divisions
- ◆ Dual role officers, first responder SWAT element

SAN DIEGO OPERATIONAL AREA METROPOLITAN MEDICAL STRIKE TEAM RESPONSE SYSTEM



Rev.8/99

Joint Entry Operations

- ***Concurrent Threats***
 - ◆ Hazardous Materials
 - ◆ IEDs
 - ◆ Bad Guys
- ***Multi-disciplinary - Entry Team***
 - ◆ HIRT
 - ◆ EDT
 - ◆ SWAT

Entry Objectives

- ***Team Security*** - SWAT
- ***Render Safe*** - EDT
- ***Rescue*** - HIRT & SWAT
- ***Agent ID and Sampling*** - HIRT

Cross Equipping and Cross Training

■ **HIRT**

- ◆ Body Armor
- ◆ SWAT Tactics

■ **EDT**

- ◆ Level A
- ◆ Radiological Detection

■ **SWAT**

- ◆ Level A, B, C
- ◆ Bomb Recognition
- ◆ Chemical Recognition



March 2000

Intelligence, Surveillance and Reconnaissance (on-site)

- ***Air Modeling***

- ◆ CATS and CAMEO with local weather

- ***Surveillance***

- ◆ Teletrac System

- ***Terrorism Early Warning Group***

- ◆ *Established 2002*

- ***Reconnaissance***

- ◆ Thermal/Visual Imaging with telemetry
- ◆ Helicopter video downlinking



Response to Nuclear Threat

■ **Detection**

- ◆ Radiation Pagers on all Engines
- ◆ General Survey (HIRT)
 - ☞ Radiological Isotope Identification
 - ☞ Dosage measurements



Response to Biological Threat

■ **Non-Credible (Potentially Credible)**

◆ *Always treated as real until confirmed otherwise*

Specialists from HIRT, EMS, CIMU, FBI

- ☞ Investigated as a crime scene
- ☞ Decon, treatment, transport unlikely
- ☞ Information provided to citizens

◆ Detection

- ☞ BT-3 Lab (Public Health Lab,
- ☞ PCR Testing
- ☞ Nucleic Acid or Bio-assay



Bio Sampling Kit



Patient Contact Information Tracking Document

Public Safety Official Use Only Patient Contact # _____			
PATIENT CONTACT INFORMATION FOR SUSPECTED MEDICAL EXPOSURE			
Your Name: _____ Age: _____ Sex (M or F): _____			
Address: _____			
Number	Street	Apt./Suite #	

City	State	Zip Code	

Day Phone: (____) _____	(Home/Work)	Night Phone: (____) _____	(Home/Work)
Cellular Phone: (____) _____	Pager: (____) _____	PIN _____	
Fax Phone: (____) _____			
Contact Person (not living at same address): _____ Phone: _____			
Were other family members with you at time of exposure (Yes / No)? If Yes:			
Name: _____	Age: _____	Sex (M or F): _____	
Name: _____	Age: _____	Sex (M or F): _____	
Name: _____	Age: _____	Sex (M or F): _____	
Name: _____	Age: _____	Sex (M or F): _____	
Your location at the time of initial exposure notification (be specific, e.g. northwest corner of the second floor near customer service...): _____			

Approximate amount of time you were in the exposure area (be specific, e.g., work shift started at 8:00 am, and exposure notification came at approximately 10:45 am. Approximate total time in exposure area was 2:45 hours...): _____			

This information will be kept confidential, and will only be utilized by Public Health officials to facilitate contacting you with follow-up information. Thank you for your cooperation.			
Revised 2/10/99 - PatientContactForm.V3			

PATIENT DISPOSITION (To be completed by Public Safety Officials)	
Has patient been decontaminated at the scene? Y / N	
If Yes, status of patient's clothing and personal effects:	
<input type="checkbox"/> Decontaminated	<input type="checkbox"/> Retained by HIRT <input type="checkbox"/> Released to Patient
If No, is patient electing to leave the scene and declining this service? Y / N	
II. Has patient been provided with pertinent medical information? Y / N	
III. Has patient been transported to a medical facility? Y / N	
If Yes, which facility: _____	
IV. Comments:	
Revised 2/10/99 - PatientContactForm.V3	

ANTHRAX

General Information:

The disease Anthrax is caused by a bacterium called *Bacillus anthracis*. This bacterium is found in soil. Animals that graze such as cattle, goats and sheep may be infected. Human infection is usually occupational (e.g. farm workers, veterinarians) and a consequence of skin contact with the bacteria, or ingesting or inhaling bacterial spores from infected animals and their products. Anthrax spores are considered a potential biologic weapon at the present time, although its' use as a weapon has not been documented. Developing a weapon from anthrax bacterium requires considerable skill and resources. If anthrax spores were released as a weapon, exposure would most likely be through inhalation. Human-to-human transmission has not been documented.

Symptoms of Inhalation Anthrax:

Initial symptoms of inhalation anthrax are non-specific and usually occur between 1-6 days after exposure. Symptoms may include fatigue, low grade fever, chest discomfort, and dry cough. These symptoms may improve after 2-4 days, followed by sudden onset of difficult breathing. Individuals experiencing symptoms of inhalation anthrax following a potential exposure should seek medical attention immediately.

Treatment:

Antibiotic therapy has been effective in treating anthrax acquired through skin exposure. Antibiotic treatment for inhalation anthrax has demonstrated value in studies conducted by the U.S. Army involving monkey exposure to anthrax spores. A licensed human anthrax vaccine consisting of a 6-dose series with yearly boosters is administered in conjunction with antibiotic treatment. This vaccine has been proven to protect against anthrax acquired through skin exposure in occupational settings.

What to Do:

If information becomes available indicating human exposure to anthrax, you will be contacted immediately and advised of appropriate treatment. It is therefore essential that you provide accurate location information (e.g. home, work and alternate phone numbers) so that you may be contacted immediately if information relative to your health is available during the investigation of this event.

Response to Chemical Threat

- **Detection / Identification**

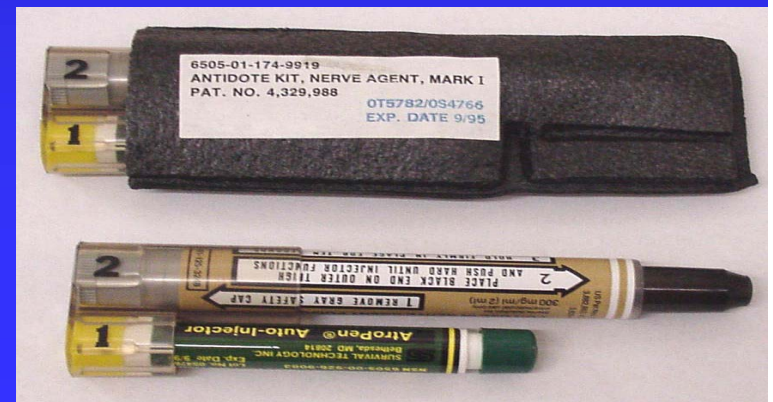


HAPSITE Field-Portable GC/MS
On-Site VOC Analysis In Minutes



Response to Chemical Attack

- **Credible (Release Suspected / Confirmed)**
 - ◆ Multi-Casualty 1st Alarm, HIRT, CIMU, MFF, FBI
 - ◆ Mass Decon, Triage, Treatment, Transport performed by First Responders
 - ☞ These functions will be invoked as required, and tailored to the circumstances
 - ☞ Antidotes onboard every fire unit



Decontamination





Questions???

